



TESTIMONY

Submitted by Bree Sanca RN MSN, VP for Behavioral Health
Elara Caring

**Appropriations Public Hearing on the Governor's Proposed FY 24 Budget Adjustments for Human Services
Agencies
March 1, 2023**

Senator Osten, Representative Walker, Ranking Members Berthel and Nuccio, and distinguished members of the Appropriations Human Services Subcommittee, my name is Bree Sanca, and I am the Vice President for Behavioral Health at Elara Caring. I am an RN with over 21 years' experience, most of which has been in home health. I also serve as the Immediate Past Chair for Connecticut Healthcare at Home.

Elara Caring, formerly New England Homecare, is the largest provider of behavioral home health services in Connecticut-serving over 3800 Medicaid beneficiaries in their homes and communities. We have locations in Middlebury, New Haven, Windsor, Cromwell, and Shelton.

While the Governor's budget does include funding for Medicaid home health providers to accommodate minimum wage increases, we do not believe this funding will be granted for all home health services. We are still working to determine how this funding will be applied, but in the past it has only gone to services provided by lower wage, non-licensed workers. Therefore, we believe this budget falls short in that there are not new Medicaid rate increases for the majority of the services our agency provides. Skilled home health Medicaid providers have received very little in the way of rate increases for several years. We acknowledge and appreciate some minor increases which were provided in the state's Home and Community Based Services ARPA Spending Plan, but unfortunately, we continue to face challenges, particularly for certain services offered under our umbrella. In fact, the medication administration rate for behavioral health home care was drastically cut by 15% in 2016, leaving providers in a position to figure out how to do more with much less. At a time when behavioral health care is at the forefront of healthcare discussions, we have been frustrated with the inability to come back from that rate cut. Given the state of fiscal health in Connecticut, the time is now to ensure fair Medicaid rates for those providers that have made servicing the Medicaid population part of their mission.

Additionally, we are one of only three providers in the state to provide complex care nursing services to pediatric and adult medically fragile individuals. This is a very unique and difficult to serve population, which requires 24/7 nursing care by a highly specialized nurse. Finding and retaining the workforce to meet the needs of this critical population is incredibly challenging. The legislature recently approved a much needed rate increase for this service, however this was only given for individuals under 18. We do not understand the discrepancy based on age, as the care does not change once a person turns 18, and in fact, only becomes more complex as these clients age. Currently, the Human Services Committee is considering a bill to bring parity to this rate, and we implore this committee to put the funding behind it. Connecticut is the only state in the country that has a rate differential by age. The only alternative care for this population is the hospital, a much more expensive level of care which requires patients to be separated from their families.



Medicaid home health providers face continued challenges, many of which are directly related to underfunding. Regulatory constraints, unfunded mandates and workforce challenges all impact our ability to serve the Medicaid population. Elara Caring currently employs three full time social workers to assist beneficiaries with the complicated redetermination process-we do not get reimbursed for this work. While other sectors of the healthcare system have benefited from permanent rate increases, home health has not, sending a clear message to providers that our pleas for adequate and sustainable rates have not been heard.

Home health nursing is far more than simply providing medical care in the home. To illustrate the true nature of a home health nurse's work, I would like to close with this story. During one of the coldest days in December, a behavioral health patient called our nurse because he was lost sitting in his car, freezing, disoriented and unable to tell her anything about his location other than a street sign he could read. That nurse walked the streets of Torrington until she found him. She was able to get the patient to the hospital safely and fortunately this story had a good outcome. I tell this story not because she did what any good human would do, I tell it because out of all the people this patient could have called, he called his nurse.

Please consider investing some of the states' surplus into Medicaid home health rates so agencies like mine can continue to provide the care these Connecticut residents deserve.

Respectfully,

Bree Sanca RN MSN

Regional VP of Behavioral Health

Elara Caring

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